

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Keep Conservatives United

ADDRESS (number and street) PO Box 97341

Check if different than previously reported. (ACC) Raleigh NC 27624

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00499525

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on M M / D D / Y Y Y Y Y Y in the State of  

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 04 / 01 / 2018 through M M / D D / Y Y Y Y Y Y 06 / 30 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Harris, Bob, , ,

Type or Print Name of Treasurer

Signature of Treasurer Harris, Bob, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 02 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

|                 |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**Keep Conservatives United**

Report Covering the Period: From:  /  /  To:  /  /

|  | COLUMN A<br>This Period               | COLUMN B<br>Calendar Year-to-Date     |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2018"/>  | <input type="text"/>                  | <input type="text" value="19937.13"/> |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="9704.68"/>  |                                       |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="0.00"/>     | <input type="text" value="0.00"/>     |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="9704.68"/>  | <input type="text" value="19937.13"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="0.00"/>     | <input type="text" value="10232.45"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="9704.68"/>  | <input type="text" value="9704.68"/>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>     |                                       |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <input type="text" value="80500.00"/> |                                       |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

Keep Conservatives United

Report Covering the Period: From: 04 / 01 / 2018 To: 06 / 30 / 2018

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 0.00                          | 0.00                              |
| (ii) Unitemized .....   | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 0.00                          | 0.00                              |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 0.00                          | 0.00                              |
| 12. Transfers From Affiliated/Other Party Committees.....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....  | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds  |                               |                                   |
| (a) Non-Federal Account (from Schedule H3).....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....  | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..   | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶                         | 0.00                          | 0.00                              |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 0.00                          | 0.00                              |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 0.00                          | 232.45                            |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 0.00                          | 232.45                            |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 10000.00                          |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 0.00                              |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 0.00                          | 10232.45                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 0.00                          | 10232.45                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 0.00                                  | 0.00                                      |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 0.00                                  | 0.00                                      |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 0.00                                  | 232.45                                    |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 0.00                                  | 232.45                                    |

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **Keep Conservatives United** Transaction ID : **SC/10.4104**

|  |             |   |   |
|--|-------------|---|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Harris, Bob, , , |             | <input checked="" type="checkbox"/> Memo Item | Election:<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 3806 Lassiter Mill Rd  |             |   |   |
| City<br>Raleigh  | State<br>NC | ZIP Code<br>27609                             |   |

|                                    |                                      |  |
|------------------------------------|--------------------------------------|--|
| Original Amount of Loan<br>3000.00 | Cumulative Payment To Date<br>500.00 | Balance Outstanding at Close of This Period<br>2500.00 |
|------------------------------------|--------------------------------------|--|

**TERMS**

|   |   |                               |   |
|---|---|-------------------------------|---|
| Date Incurred<br>MM / DD / YYYY<br>09 / 03 / 2011 | Date Due<br>MM / DD / YYYY<br>ON DEMAND | Interest Rate<br>0.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---|---|-------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

| 1. Full Name (Last, First, Middle Initial) | Name of Employer               |  |  |
|--|--------------------------------|--|--|
| Mailing Address                            | Occupation                     |  |  |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |  |  |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer               |  |  |
| Mailing Address                            | Occupation                     |  |  |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |  |  |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer               |  |  |
| Mailing Address                            | Occupation                     |  |  |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |  |  |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer               |  |  |
| Mailing Address                            | Occupation                     |  |  |
| City State ZIP Code                        | Amount Guaranteed Outstanding: |  |  |

|   |   |         |
|---|---|---------|
| <b>SUBTOTALS</b> This Period This Page (optional) .....       | ▶ | 2500.00 |
| <b>TOTALS</b> This Period (last page in this line only) ..... | ▶ |         |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **Keep Conservatives United** Transaction ID : **SC/10.4189**

|  |             |   |
|--|-------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>N</b> <input type="checkbox"/> Memo Item<br>Harris, Bob, , , |             | Election:<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 3806 Lassiter Mill Rd  |             |   |
| City<br>Raleigh  | State<br>NC |   |

|                         |                            |   |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 14000.00                | 10000.00                   | 4000.00                                     |

**TERMS**

|                                  |                             |               |   |
|----------------------------------|-----------------------------|---------------|---|
| Date Incurred                    | Date Due                    | Interest Rate | Secured:  |
| MM / DD / YYYY<br>03 / 17 / 2012 | MM / DD / YYYY<br>ON DEMAND | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
|--|------------------------------------|
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|   |         |
|---|---------|
| <b>SUBTOTALS</b> This Period This Page (optional) .....       | 4000.00 |
| <b>TOTALS</b> This Period (last page in this line only) ..... | [ ]     |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **Keep Conservatives United** Transaction ID : **SC/10.4296**

|  |             |   |
|--|-------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>N</b> <input type="checkbox"/> Memo Item<br>Harris, Bob, , , |             | Election:<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 3806 Lassiter Mill Rd  |             |   |
| City<br>Raleigh  | State<br>NC | ZIP Code<br>27609   |

|                         |                            |   |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 15000.00                | 0.00                       | 15000.00                                    |

**TERMS**

|                                  |                             |               |   |
|----------------------------------|-----------------------------|---------------|---|
| Date Incurred                    | Date Due                    | Interest Rate | Secured:  |
| MM / DD / YYYY<br>04 / 21 / 2014 | MM / DD / YYYY<br>ON DEMAND | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
|--|------------------------------------|
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|   |          |
|---|----------|
| <b>SUBTOTALS</b> This Period This Page (optional) .....       | 15000.00 |
| <b>TOTALS</b> This Period (last page in this line only) ..... | [ ]      |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Keep Conservatives United** Transaction ID : **SC/10.4352**

|  |             |   |
|--|-------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>N</b> <input type="checkbox"/> Memo Item<br>Harris, Bob, , , |             | Election:<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 3806 Lassiter Mill Rd  |             |   |
| City<br>Raleigh  | State<br>NC | ZIP Code<br>27609   |

|                         |                            |   |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 32000.00                | 0.00                       | 32000.00                                    |

|              |                                  |                             |               |   |
|--------------|----------------------------------|-----------------------------|---------------|---|
| <b>TERMS</b> | Date Incurred                    | Date Due                    | Interest Rate | Secured:  |
|              | MM / DD / YYYY<br>06 / 20 / 2014 | MM / DD / YYYY<br>ON DEMAND | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

|  |                  |          |                                    |
|--|------------------|----------|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |

|   |   |          |
|---|---|----------|
| <b>SUBTOTALS</b> This Period This Page (optional) .....       | ▶ | 32000.00 |
| <b>TOTALS</b> This Period (last page in this line only) ..... | ▶ | [ ]      |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Keep Conservatives United** Transaction ID : **SC/10.4377**

|  |             |   |
|--|-------------|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>N</b> <input type="checkbox"/> Memo Item<br>Harris, Bob, , , |             | Election:<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 3806 Lassiter Mill Rd  |             |   |
| City<br>Raleigh  | State<br>NC | ZIP Code<br>27609   |

|                         |                            |   |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 15000.00                | 0.00                       | 15000.00                                    |

**TERMS**

|                                       |                                  |               |   |
|---------------------------------------|----------------------------------|---------------|---|
| Date Incurred                         | Date Due                         | Interest Rate | Secured:  |
| M M / D D / Y Y Y Y<br>07 / 02 / 2014 | M M / D D / Y Y Y Y<br>ON DEMAND | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
|--|------------------------------------|
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|   |          |
|---|----------|
| <b>SUBTOTALS</b> This Period This Page (optional) .....       | 15000.00 |
| <b>TOTALS</b> This Period (last page in this line only) ..... |          |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **Keep Conservatives United** Transaction ID : **SC/10.4428**

|  |             |   |   |
|--|-------------|---|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Harris, Bob, , , |             | <b>N</b> <input type="checkbox"/> Memo Item | Election:<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 3806 Lassiter Mill Rd  |             |   |   |
| City<br>Raleigh  | State<br>NC | ZIP Code<br>27609                           |   |

|                                     |                                    |   |
|-------------------------------------|------------------------------------|---|
| Original Amount of Loan<br>12000.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>12000.00 |
|-------------------------------------|------------------------------------|---|

**TERMS**

|   |   |                               |   |
|---|---|-------------------------------|---|
| Date Incurred<br>MM / DD / YYYY<br>08 / 13 / 2014 | Date Due<br>MM / DD / YYYY<br>ON DEMAND | Interest Rate<br>0.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---|---|-------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

|  |                  |          |                                    |
|--|------------------|----------|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |

|   |   |          |
|---|---|----------|
| <b>SUBTOTALS</b> This Period This Page (optional) .....       | ▶ | 12000.00 |
| <b>TOTALS</b> This Period (last page in this line only) ..... | ▶ | 80500.00 |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.